Texas Council on Cardiovascular Disease and Stroke Meeting Minutes

Friday, February 12, 2021 1:00 p.m.

Due to COVID-19 pandemic, this meeting was conducted virtually using Microsoft Teams only. There was not a physical location for this meeting.

Following table represents member attendance at the Texas Council on Cardiovascular Disease and Stroke meeting held February 12, 2021.

Member Name	In Attendance		
J. Neal Rutledge, MD (Vice Chair)	Yes		
Elie Balesh, MD	No		
Stanley Duchman, MD	Yes		
Janet Hall Hewlett, RD, LD	Yes		
Suzanne Hildebrand (Chair)	Yes		
Samantha Kersey	Yes		
Sherron D. Meeks, RN, PhD	Yes		
Shilpa Shamapant	Yes		
Harry "Kyle" Sheets, MD	Yes		
E'Loria Simon-Campbell, PhD	Yes		
Maricella "Marcie" Gonzalez Wilson, RN	Yes		
NON-VOTING MEMBERS			
HHSC - Chelsea Couch	Yes		
DSHS - Kelly Fegan-Bohm, MD	Yes		
TWC - Karen Brajcki	No		

[&]quot;Yes" indicates attended the meeting. "No" indicates did not attend the meeting.

Agenda Item 1: Call to Order

The Texas Council on Cardiovascular Disease and Stroke (CVDS) meeting was convened at 1:05 p.m. by Ms. Suzanne Hildebrand, Council Chair, and she welcomed members, staff and public.

Agenda Item 2: Welcome, Roll Call, Introductions, Opening Remarks

Ms. Hildebrand introduced Ms. Sallie Allen, Advisory Committee Coordination Office, HHSC. Ms. Allen provided logistics, conducted a roll call, instructed members to introduce themselves and noted a quorum was present.

Agenda Item 3: Approval of November 13, 2020 Meeting Minutes

Ms. Hildebrand requested a motion to accept the November 13, 2020 meeting minutes.

MOTION:

Ms. Marcie Gonzalez Wilson moved to accept the November 13, 2020 minutes. Dr. Sharon Meeks seconded the motion. Ms. Allen conducted a roll call vote, and the motion passed unanimously.

Agenda Item 4: Chronic Care Workgroup and Stroke Survivors and Caregivers Conference Report

Ms. Hildebrand stated due to the pandemic there were no updates to report on the virtual conference that was being planned for Houston. She added that the workgroup hopes to host a conference in West Texas in the near future.

Agenda Item 5: Combating Health Disparities in West Texas

Ms. Hildebrand introduced Ms. Rebecca Joseph, Raider Medical Screening Society (RMSS) Founder, Texas Tech University. Ms. Joseph provided an overview and referenced a PowerPoint handout, "Combating Disparities on West Texas RMSS".

RMSS is a nonprofit organization, and the primary goal is to screen people in the Lubbock community for precursory symptoms to cardiovascular disease especially in underserved population areas.

Highlights included:

- The USA is ranked #1 in highest gross national product; our Healthcare Expenditure is \$3.6 trillion, yet we are ranked #35 in life expectancy.
- Healthcare costs per capita spending in the US is almost twice the average of other wealthy developed countries.
- Access to income, education and social determinants of health are the major forces that shape the health of people and the communities.
- Living in a low-income area can cause a lot of stress (maintaining two jobs, caring for family, paying bills, etc.) and it builds up a biological reaction or feeling of decreased control, what we call fight-or-flight reaction.
- West Texas alone has approximately 35 counties that have no physicians and there is a shortage in healthcare providers for this rural population.
- By 2030 the shortage of primary care physicians is expected to increase by 67%
- Based on research done by University of Cambridge, the idea of routine screening and treatment is what lead to the creation of RMSS.
- RMSS, comprised of undergraduate pre-health students, perform:
- Basic vital signs to detect precursory symptoms of cardiovascular disease, which include BMI, temperature, oxygen saturation, heart rate of respirations, blood pressure, glucose, and cholesterol tests.
- Results are analyzed by a healthcare provider, if abnormal, patient is referred to a free or low-cost clinic in Lubbock.
- Helping to manage the health of this population we hope to reduce ER visits and readmission rates. This also allows the students to gain experience, prepare them for a career in medicine and develop interpersonal skills.

The organization has received recognition from the Lubbock community and opportunities to broaden the program to other areas in Texas is very favorable.

Agenda Item 6: AHORA (Andar, Hablar, Ojos, Rostro, Ambos brazos o piernas) - Latino Community Stroke Education

Ms. Marcela Wilson provided an overview and referenced a PowerPoint handout, "AHORA (Recognizing a STROKE)".

Highlights included:

- Goal is to educate the public on recognizing the sign/symptoms of a stroke.
- Need to identify barriers to stroke and risk factors unique to Hispanic population.
- This led to creation of Spanish acronym, AHORA, which means NOW!
- Each letter represents a sign or symptom to help recognize and alert a 911 call.
- AHORA was incorporated in the PCFR protocol 1/01/2021; published in Viva Polk magazine and invited to participate at EMS conference in San Antonio and Florida.

- Need to raise funds to promote awareness and create a flyer that can be distributed via food banks, PPE supply kits, community shelters, etc.
- Information will be shared with members to promote awareness via websites.

Agenda Item 7: Agency Representative Reports

Department of State Health Services (DSHS) Report -

Ms. Jessica Hyde, DSHS, provided the following updates and referenced a handout, "Self-Measured Blood Pressure Monitoring (SMBP) CPT Codes" Flyer.

- 87th Legislative session updates:
 - o As of February 5th, DSHS is tracking 265 bills. Of these, 42 have been assigned to the Community Health Improvement Division for further analysis.
 - Senate Bill 116 and House Bill 727 are companion bills related to the establishment of a border public health initiative by DSHS. The bills ask DSHS to develop an initiative to reduce the adverse health impacts of diabetes, hypertension, and obesity for adults and children in the border counties.
- Program Updates:
 - Chronic Disease Epidemiology branch will begin analysis of the heart attack and stroke data from the national registries in March for the 2021 annual reports. The 2020 reports are currently under review and will hopefully be published sometime in March.
 - The Heart Disease and Stroke Program developed a one-pager to summarize the current procedural terminology or CPT codes that were released in January 2020 by AMA to support self-measure blood pressure monitoring. The flyer is in the meeting packet and it refers to new codes that are available for one time use when a physician's office provides training calibration and patient instruction and for monthly use when blood pressure readings are collected. There are some documentation requirements which can be found at the link provided by the American Medical Association in the flyer. Automated blood pressure monitors are a durable medical equipment (DME) benefit covered by Texas Medicaid when prescribed by a physician. The DME and applicable diagnosis codes can be found in the manual linked in the flyer.
 - The Heart Disease and Stroke Program is currently working on continuation applications for Year 4 of two federal awards from the Centers for Disease Control and Prevention. These funds will allow the program to continue implementation of health systems interventions, team-based care approaches, and communityclinical linkages to identify and manage diabetes, hypertension, and high cholesterol.
 - The program was able to secure optional modules related to heart health in the 2021 Texas Behavioral Risk Factor Surveillance System (BRFSS) survey. These will provide data on:
 - Prevalence of family caregiving, hours of unpaid caregiving, which can be analyzed by condition (including stroke)
 - Home blood pressure monitoring
 - Sodium or salt-related dietary behaviors
 - The program is working with the DSHS Healthy Texas Mothers and Babies Branch to provide technical assistance to their Severe Hypertension in Pregnancy Learning Collaborative as they develop change ideas for community and clinical interventions to improve the rates of maternal hypertension before, during and after pregnancy.

Health and Human Services Commission (HHSC) Report -

Ms. Chelsea Couch, HHSC, provided the following program highlights:

- Aging Services Coordination (ASC):
- HHSC received the Center for Health Care Strategies (CHCS) technical assistance grant. The grant will develop or enhance existing strategies assist family caregivers with support from the John a Hartford foundation and the Michigan Health endowment fund. HHS will at developing more robust resources, programming, and supports for caregivers.
- Aging Texas Well (ATW) is in development. ASC will reach out for support through sharing of a survey that will help to inform the direction of the ATW Plan.
- In federal fiscal year (FFY) 2020 (October 2019 September 2020), Texercise reached 1,461 participants in 22 counties through the Texercise Classis and Select programs. Due to COVID-19 response, they reached 312 participants via 15 virtual implementations.
- SNAP-Ed Activities for FFY 2020:
 - An estimated 39,328,239 Texans have been reached through direct and indirect education interventions.
 - Implementing agencies provided 41,150 direction education classes (inperson and virtual)
 - o Implementing agencies delivered 100 initiatives and interventions 43 direct education, 19 social marketing, and 38 policy, systems and environmental.
 - Majority of intervention topics (51%) focused on changing individual behavior related to healthy eating.
 - Implementing agencies delivered program interventions at 5,523 sites, with
 77% taking place where individuals learned and lived.

Texas Workforce Commission Report -

Ms. Karen Brajcki, (TWC) was not able to attend meeting. Ms. Sallie Allen read aloud her written update for TWC.

- Employment Supports for Brain Injury (ESBI) services benefit individuals with acquired brain injuries by encouraging the development of community-based Interdisciplinary Teams (IDTs) throughout Texas. The purpose of this program is to enhance employment outcomes for individuals with brain injuries. The IDT's therapeutic intervention occurs during the three employment-based phases of ESBI:
 - Initial Assessments and Evaluations
 - Therapeutic Interventions
 - Employment Services

Benefits of ESBI services are to:

- Integrate the therapy and employment needs of Vocational Rehabilitation (VR) customers
- Involve the coordination of multiple providers to assist VR customers in maintaining or achieving a competitive integrated employment outcome.
- Address deficits in functional and cognitive skills based on individually assessed need.
- ESBI services may be provided in a non-residential or residential setting. Generally, the vocational rehabilitation (VR) counselor should expect a customer needing ESBI services to require a coordinated multiservice approach to address cognitive issues and other comorbidities.
- Data related to successful closures will be provided at the next meeting. Ms. Brajcki would like members to provide her with topics, areas of interest they would her to report on.

Agenda Item 8: Liaison Reports

Office of Acquired Brain Injury (OABI) -

Dr. Carrie Bradford provided the following highlights:

- Two brain injury programs within HHSC:
 - o Comprehensive Rehabilitation Services (CRS) and
 - Office of Acquired Brain Injury (OABI)
- March is Brain Injury Awareness month and planned activities include:
 - o Texas Brain Injury Conference March 25-26, 2021
 - Host of Webinar Series March 3-31, 2021
- National Center on Advancing Person-Center Practices and Systems (NCAPPS)
 - HHSC is advancing person-centered practices across the agency.
 - o Strategic plan presented to HHS Leadership February 16
 - CRS and OABI programs, along with 14 other states joined the Brain Injury Learning Collaborative
- Texas Brain Injury Advisory Council (TBIAC)
 - Addresses strategic planning, policy, rules, and services related to preventing brain injury.
 - Recommends best practices for rehabilitation, long term services and supports for people who have experienced brain injuries to improve their quality of life and the ability to function independently in the home and community.
 - o Next TBIAC meeting is scheduled for April 19, 2021.

For additional information or updates on brain injury programs, council events and activities go to: https://service.govdelivery.com/accounts/TXHHSC/subscriber/new

Governors EMS and Trauma Advisory Council (GETAC)

Dr. Neal Rutledge advised there was very little to report due to Covid-19. The stroke rules are in process and have been published on the website for everyone to look at and there is no report front the Cardiac Care Committee.

American Stroke Association/American Heart Association

Ms. Deb Motz, Quality Research Outcome and Analytics Team, provided the following highlights.

- Alex Puente is the new Government Relations Director, replacing Shelby Massey.
- International Stroke Conference is March 17-19, 2021 and will be held virtually.
- May is Stroke Awareness Month
- COVID-19 registry is available for all hospitals that want to join, at no cost.
- COVID-19 FAQs have been added for the GET with the Guidelines Stroke program, as well as heart failure and coronary artery disease. We hope to learn more about how it is affecting the cardiovascular disease population.

Agenda Item 9: Discussion and Action Concerning any of the above items and future meeting topics.

Ms. Hildebrand advised that Dr. David Wampler is the new GETAC/Cardiac Care representative, replacing Catherine Bissell.

Agenda Item 10: Public comment

No public comment was offered.

Agenda Item 11: Adjourn Ms. Hildebrand advised the next meeting is scheduled for May hearing no other comments the meeting adjourned at 2:26pm.	14, 20	21 at 1:0	00p.m. and